## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

17 00.00	MENT # 578695 HOTEL INC.	5 (9)		 	RISK ANGA DIDIK BIRKI KUBU
Principal Plac	o of Business	Mailing Address			
Principal Place of Business Mailing Address  507 ESPANOLA WAY 507 ESPANOLA WAY					
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139				DO NOT WRITE IN THIS:	SPACE
				3. Date Incorporated or Qualified	31700
				07/07/1978	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	W	26		59-1905980	Not Applicable
Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
27			6 Floation Compains Financian	<del></del>	
23		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	nt Registered Agent		<ol><li>Name and Address of New Registered</li></ol>	Agent
ME	RA, MANUEL		81 Name	MANUEL VIERAA JE	<b>`</b>
<del>500 ESPANOLA WAY-</del>			82 Street	Address (P.O. Box Number is Not Acceptable)	·
MIAMI BEACH FL 99199			83	509 ESPANOLA WAY	<del></del>
			63		
			84 City	MIAMI BEACH FL	85 Zio Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, appraicable the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered age	/an U	TE Registered Agent signature		198
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	<del>PD-</del>	DELETE	1.1 TITLE	PD	Change Addition
NAME	VIERA: MANUEL		1.2 NAME	MANUEL VIERA JR 509 ESPANOLA WAY	
STREET ADDRESS	509 ESPANOLA WAY		1.3 STREET ADDRESS	509 ESPANOLA WAY	
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY-ST-ZIP	MIAMI BEACH, FL. 33	1139
TITLE	SD	☐ DELETÉ	2.1 TITLF		Change Addition
NAME	VIERA, NOEMI		2.2 NAME		
STREET ADDRESS	509 ESPANOLA WAY		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI BEACH FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		L. Deterie	3.2 NAME		C. Ostariĝo C. Madricon
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		The second	5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**FILED** 

Jan 28 1998 8:00am

Secretary of State